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ABSTRACT

An accreditation process that measures and assesses elements of high quality child care in New Zealand is reported. The process is based on the Early Childhood Program Accreditation procedure established by the National Association for the Education of Young Children, as modified for Australian use by personnel at the Queensland University of Technology. The accreditation process takes place in a number of stages, including the involvement of parents and the community. The steps include registration, self-study, validation, and finally the accreditation decision. The categories of quality include the following: (1) interactions among staff and children; (2) curriculum and programs for children; (3) interactions between staff and parents; (4) staff qualifications and development; (5) staffing patterns; (6) physical environment and setting; (7) health and safety factors; (8) food and nutrition issues; (9) management and administration; and (10) evaluation. Feedback from staff at eight centers indicates some misgivings on the part of staff and includes comments on the relevance of the self-study process and reactions of parents and evaluators. The accreditation process aims to secure a charter for high quality in early childhood services and is based on predetermined criteria of high quality care that can be readily identified and assessed. (LB)

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ACCREDITATION:

A CHARTER FOR QUALITY IN EARLY CHILDHOOD SERVICES

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A good deal of information is available now from a range of studies which points out that the development of young children is not inhibited or harmed in any way, and may even be enhanced in some situations, by attendance at a Child Care Centre, a key element of these studies however is that the centres involved provided care of a better than average standard, in other words, the centres all displayed features which are indicators of quality care.

This paper will outline a process by which elements of quality care can be measured and assessed. The process involves parents and the community as well as the centre, it can provide answers to many questions about the centre and is a readily identifiable indicator of quality.

While State or Local Government licensing regulations usually ensure that minimum standards of physical safety, hygiene, nutrition and staffing are maintained in child care those additional elements which ensure quality care are more difficult to regulate. However we do know what most of those features and characteristics of quality care are and in the past few years there has been evolving interest in developing procedures whereby child care centres can ensure that they are providing quality care. The paper will present details of the trailing of a child care centre accreditation procedure in order to establish discussion points for relating this to New Zealand's Charter procession early childhood centres.

Accreditation broadly defined is

"a process whereby a person or programme receives a certificate which indicates that certain agreed upon criteria or standards have been met"

in doing so it

"identifies and defines achievable standards" (in this case – of quality care)

and

"provides a professional, industry based scale of approval".

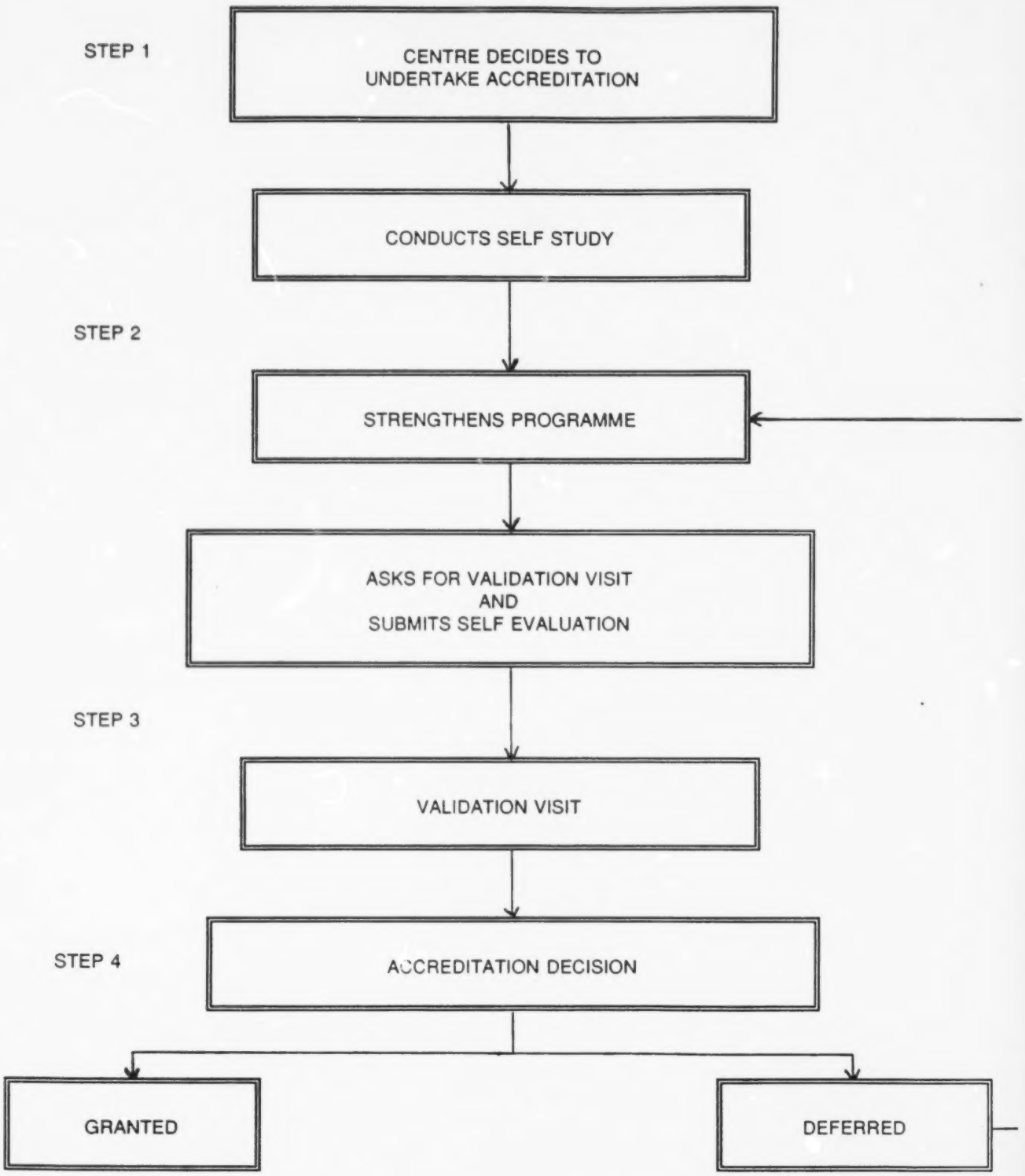
The National Association for the Education of Young Children (NAEYC) have established an Early Childhood Programme Accreditation procedure and this scheme has been modified for Australian use by Nadine McCrea and Barbara Piscitelli, School of Early Childhood Studies, Queensland University of Technology.

THE ACCREDITATION PROCESS

Accreditation takes place in a number of stages which will now be described and which are set out in Table 1. (See overleaf).

TABLE 1

AN ACCREDITATION PROCESS



Step One: Registration

A centre will write to the accreditation body to register their interest and in turn will receive materials which list the criteria and which also have suggestions for carrying out the response.

Step Two: Self Study

The centre's staff, the director and the parent and/or management committee representatives (or proprietor) use the criteria to record how they (i.e. the centre) measure up. In some areas the response will be "we are doing a reasonable job"; in other areas it might even be "better than reasonable". In all probability there may be a few areas where the judgement might be, "not so reasonable".

The idea is that the centre then starts to "strengthen the program" i.e. they start to work on these "not so reasonable" areas, perhaps calling in outsiders for help when necessary. The accreditation body is not involved at this stage, they will only come when the centre wants them to make their assessment. Assistance could be sought from a range of sources including training institutions and the support and advisory staff of the regulatory bodies. It should be emphasised that the support and advisory process is quite separate from the actual validation process.

Step Three: Validation

When the centre feels that they have met the criteria then a validation visit is arranged. The director completes the "Self Evaluation" forms in preparation for the visit. The validator visits to observe the programme to check that the various criteria are being met and then reports back to the accreditation body.

Step Four: Accreditation Decision

The accreditation body looks at the Self Reports from the centre and at the validator's report and makes its decision, either to accredit or to defer a decision for a while longer. Deferral would usually be made on the basis that the centre needs a little more time to meet all the criteria successfully.

THE ACCREDITATION PACKAGE

As mentioned previously the procedure used here is an Australian adaptation of the NAEYC procedure which has been in use in the U.S.A. for four or five years now. The package includes a guide to the process, a handbook of high quality criteria and various evaluation forms and questionnaires. The criterion handbook identifies 10 areas which relate to quality children's programmes and uses them as the focus for the accreditation process. These ten categories of quality include:

- Interactions among staff and children
- Curriculum/programmes for children

- Interactions between staff and parents
- Staff qualifications and development
- Staffing patterns
- Physical environment and setting
- Health and safety factors
- Food and nutrition issues
- Management and administration
- Evaluation

For each of these ten areas, criteria and descriptions of appropriate care or practice have been developed.

TRAILING AND FEEDBACK OF THE SELF STUDY PROCEDURE

Trials were carried out in 8 centres in metropolitan Adelaide. As a first step groups of child care centre directors were addressed at two Children's Services Office regional meetings and were invited to participate. During this initial contact many centre directors felt that they were too busy to participate in the exercise. Some also felt that staff might be threatened by the process and what it might reveal about individual staff members. A selection of the initial reactions included:

- It would take too much time
- Staff are too busy
- It's too threatening
- Would be unfair
- There are too many changes in staffing for there to be any lasting benefit
- Don't know how the parents would react

In most cases however after the director had held discussions with management committees and staff the centres agreed to become involved. Following this self selection the materials were taken to the centres and briefings on the procedure were carried out. The eight centres represented a reasonable cross-section of the Adelaide population.

In order to gain feedback about the accreditation process itself and the procedures involved and in particular the "Self Study", those who participated were asked to complete an evaluation report.

A representative selection of responses to the first three questions are now presented.

Q.1 How did you feel about doing this Self Study exercise?

- Very worthwhile, a positive exercise, highlights both strengths and weaknesses of the programme.
- Gives very good recognition where staff are doing well.
- Felt a bit threatened at first – but it was OK really and not threatening at all.

Q.2 Do you feel that it has any relevance to your work as a care provider?

- Points out many things we should be aware of in implementing successful programmes.
- Made me focus on all areas.
- We need to review our programmes and ourselves more regularly.

Q.3 Please comment on the relevance of the content in relation to –

(a) Children in care

- Re–emphasises what is involved in quality care.
- Covers all those aspects required to promote quality care.

(b) Parents

- Enables parents to have input too.
- It's good for staff to be aware of parents' feelings.
- Parents can write things that they might feel uncomfortable about telling us face–to–face.

(c) Staff

- Very good in providing all–round awareness.
- Very good for keeping staff motivated and aware of quality care.
- Staff can be involved in evaluating their own performance and the programme which enables effective goal setting.

(d) Management Committee

- The scope of the study means there are implications for management committees both in positive recognition of staff efforts and areas requiring development.
- Provides a very good guide for staff development.
- Enables the management committee to become more involved in the centre.

PARENT QUESTIONNAIRE

The parent questionnaire covered a range of areas and provided for some open ended responses.

A number of the parents who responded used the "any comments" area to provide both positive support for the centre and to comment on desired changes and developments in the programme.

Parents were not asked to comment on the accreditation process itself but the fact that they did respond with comments in either direction does indicate that parents are comfortable with the process.

EVALUATORS COMMENTS

1. The process is very worthwhile, for all those reasons mentioned above. There are positive spin-offs for children, parents and staff.

2. The responses provide well documented information on those aspects of the centre's operation which are going well. This is a great boost for everybody involved because too often we tend to focus on what is going wrong.

3. They also give indications of areas where development is still needed and in addition:
   - Would be useful for the induction of new staff members;
   - Would be helpful in preventing staff burnout by pinpointing "trouble spots";
   - Provide an excellent communication system between staff, director, parents and management committee;
   - Has potential value in being used in team building.

4. The trailing also provided useful information about the criteria indicators in the self study and their strengths and weaknesses.

5. This trial also reinforced the point that the process itself cannot be rushed. Time is needed, first of all to show people the benefits of the process and secondly for actually working through the process.

6. Time is also needed to enable those who are to be involved to become comfortable with looking at themselves and with what they are doing and to be able to do this in a non-threatening way. Not everybody will feel comfortable at first with saying "I'm not doing too well here", but the main point to remember is that all this is internal, the validator only comes in when those necessary changes have been made and when everybody at a centre feels that they can meet all the criteria successfully.

7. It is a self-study process so the centre, in effect, is in full control of their own destiny which should be a comforting thought. It is an opportunity for people to take pride in showing what they are achieving and what they are doing in their centre.

CONCLUSION

A significant feature of the accreditation process is that its objective is to ensure a charter for quality in early childhood services. It is based on agreed upon criteria of quality care which can be readily identified and assessed. It is a self driven process, for its motivation is in the hands of those who are being assessed. It is therefore positive and acceptable in ensuring that all who are involved can establish and maintain a charter for quality in services for young children.

DISCUSSION POINTS

1. Are there ways in which an accreditation system could be used in New Zealand?

2. Do you see any relationships between centre accreditation and the charter for early childhood services?

3. Could accreditation be used in all types of early childhood services in New Zealand?

4. What benefits do you see – and difficulties – in using an accreditation system?